

# ▶ Scan the code to give online or visit ProvidenceFoundations.org/employee



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BETTER	EMPLOYEE ID#			
1 by ever	NAME			
2022 Caregiver	ADDRESS			
Campaign	ADDITESS			
	CITY	STAT	E	ZIP
<b>NOTE:</b> If you currently give through recurring payroll deduction, your donation continues indefinitely and you do not need to fill out this form.	PHONE			
	PREFERRED EMAIL			
To change your recurring payroll deduction donation, see step two below.	O I would like to learn a beneficiary of my		ng Providen	ce in my will or as
STEP ONE: Consider a gift to Pro	ovidence foundatio	ons in support	of our N	⁄lission
Descriptions of these funds are listed on the back of this credited toward the Area of Greatest Need Fund. If you coper fund, per pay period is \$2.				
Specific Fund Choices		Per Pay Period	A	Annual Total
O Area of Greatest Need			x 26 _	
O Center for Medically Fragile Children			x 26 _	
O Helping Hand Fund – \$50,000 match!			x 26 _	
O Safety Net Fund for Families			x 26 _	
O Swindells Resource Center			x 26 _	
Other:			x 26 _	
Please write in an approved fund name. Your caregiver would also be happy to help!				
	ence per pay period:	\$	x 26	)
STEP TWO: Choose your paymer	nt option and sign			
$\bigcirc$ I wish for my gift to remain anonymous.				
Choose payment option:				
(All payments begin the next open pay period,	my current recurring payrol ction donation les made above will be reflected in t	(the		roll deduction period, with \$10 minimum)
	riod and continue indefinitely until y			
	Date			
Your signature is <i>required</i> to authorize or edit pay				
*I understand as of January 2023 my payroll deduction o Providence Portland Medical Foundation or Providence	donation will remain with		t be housed	at either

- O Cash/check enclosed for \$\_\_ Please make check(s) payable to Providence Children's Health Foundation.
- O Credit card Please go online to our secure donation form at ProvidenceFoundations.org/employee.

**PROVIDENCE** Children's Health Foundation

## Your gift to Providence foundations

\$50,000 match for caregivers in need

Providence Federal Credit Union is matching total donations to the Helping Hand Fund up to \$50,000. This fund provides one-time, confidential support to eligible Providence caregivers in crisis. From assisting with an unexpected medical bill, helping escape domestic abuse, or providing help during a family emergency, a gift to the Helping Hand Fund is a gift to help one of our own. Make your gift count twice!

When you support Providence foundations, you are helping connect with our Mission. Here are some funds to which you may wish to direct your gift:

- Area of Greatest Need: Supports the area that has the most immediate need, including children's programs and Providence Child Center, to ensure continuous high-quality care.
- Center for Medically Fragile Children: Supports the only pediatric skilled nursing facility in the Pacific Northwest. Babies, children and young people to 21 years of age with profound disabilities and complex medical needs can receive 24/7 long-term, short-term, respite, sub-acute and end-of-life care.
- Helping Hand Fund \$50,000 match!
- Safety Net Fund for Families: Provides for unmet needs of families receiving care in our women's clinics, family practices and pediatric specialty clinics. The fund may be used to provide underserved pregnant people with prenatal vitamins, compression socks, bellybands, diabetes supplies, car repairs, transportation vouchers and other needed items and services not covered by insurance. During the pandemic, the fund has provided life-giving aid.
- Swindells Resource Center: Provides peer-to-peer support, free resources and education for thousands of parents and caregivers whose children have special needs, developmental delays or disabilities.

#### Examples of gifts broken down per pay period

All payroll deductions begin the next open pay period, and continue indefinitely until you discontinue your gift by emailing OR.Foundations@providence.org.

Per-Pay-Period Gift Amount	Annual Total Gift
\$2	\$52
\$3	\$78
\$4	\$104
\$5	\$130
\$6	\$156
\$7	\$182
\$8	\$208
\$9	\$234
\$10	\$260

Per-Pay-Period Gift Amount	Annual Total Gift
\$11	\$286
\$12	\$312
\$13	\$338
\$14	\$364
\$15	\$390
\$16	\$416
\$17	\$442
\$18	\$468
\$19	\$494

Per-Pay-Period Gift Amount	Annual Total Gift		
\$20	\$520		
\$25	\$650		
\$30	\$780		
\$35	\$910		
\$40	\$1,040		
\$45	\$1,170		
\$50	\$1,300		

## Questions?

### Email OR.Foundations@providence.org

If you are currently giving through recurring payroll deduction, your donation continues indefinitely and you do not need to sign up. If you would like to make a change or cancel your recurring payroll deduction donation, please contact OR.Foundations@providence.org.

<sup>\*</sup>Effective January 1, 2023 funds supporting women's and children's health will be housed at either Providence Portland Medical Foundation or Providence St. Vincent Medical Foundation with the dissolving of the Providence Children's Health Foundation.